

O 4/1  
ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>B S</i>		<i>08-29-01</i>
<b>O.I.P.E. CLASSIFIER</b>	<i>7</i>	<i>49</i>	<i>9/6/01</i>
<b>FORMALITY REVIEW</b>	<i>SI</i>	<i>1021</i>	<i>09/28/01</i>
<b>RESPONSE FORMALITY REVIEW</b>			<i>/</i>

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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7C86  
07/29/01

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